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PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0551-0032.

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22764 U.S. PTO

10/15/2004
12386



UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. CFP-2303 (15722/615)

First Inventor Johnny Tai

Title RECLINER

Express Mail Label No. EV 413445945US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

- Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
- Applicant claims small entity status.
See 37 CFR 1.27.
- Specification [Total Pages 9]
(preferred arrangement set forth below)
 - Descriptive title of the Invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (*if filed*)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
- Drawing(s) (35 U.S.C. 113) [Total Sheets 5]
- Oath or Declaration [Total Pages 1]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (*if applicable, all necessary*)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 C.F.R. §3.73(b) Statement Power of (*when there is an assignee*) Attorney
11. English Translation Document (*if applicable*)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503) (*Should be specifically itemized*)
15. Certified Copy of Priority Document(s) (*if foreign priority is claimed*)
16. Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP)
Prior application information: Examiner _____

of prior application No: _____ / _____
Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below

Name	Alan D. Kamrath				
	Rider Bennett, LLP				
Address	333 South Seventh Street, Suite 2000				
City	Minneapolis	State	Minnesota	Zip Code	55402
Country	USA	Telephone	(612) 340-8925		Fax (612) 340-7900

Name (Print/Type)	Alan D. Kamrath	Registration No. (Attorney/Agent)	28,227
Signature			Date January 2, 2004

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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010204
22764 U.S.PTO

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 425)

Complete if Known

Application Number	
Filing Date	January 2, 2004
First Named Inventor	Johnny Tai
Examiner Name	
Group / Art Unit	

Attorney Docket No. CFP-2303 (15722/615)

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number	50-1188
Deposit Account Name	Rider, Bennett, Egan & Arundel, LLP
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION (continued)

3. ADDITIONAL FEES			
Large Entity Fee Code	Fee (\$)	Small Entity Fee Code	Fee (\$)
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	420	216	210
117	950	217	475
118	1,480	218	740
128	2,010	228	1,005
119	330	219	165
120	330	220	165
121	290	221	145
138	1,510	138	1,510
140	110	240	55
141	1,330	241	665
142	1,330	242	665
143	480	243	240
144	640	244	320
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	770	246	385
149	770	249	385
179	770	279	385
169	900	169	900
Other fee (specify) _____			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 40)

2. EXTRA CLAIM FEES

Total Claims	13	-20 **	=	0	X	0	=	0	Fee from below	Fee Paid
Independent Claims	1	-3 **	=	0	X	0	=	0		
Multiple Dependent					X		=	0		

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$ Code (\$))

103 18 203 9 Claims in excess of 20

102 86 202 43 Independent claims in excess of 3

104 290 204 145 Multiple dependent claim, if not paid

109 86 209 43 ** Reissue independent claims over original patent

110 18 210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY

Name (Print/Type)	Alan D. Kamrath	Registration No. Attorney/Agent)	28,227	Telephone	612/340-8925
Signature				Date	January 2, 2004

Complete if applicable

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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